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# Press Briefing by Principal Deputy Press Secretary Sarah Sanders and VA Secretary David Shulkin, 6/5/2017

James S. Brady Press Briefing Room

1:43 P.M. EDT

MS. SANDERS: Good afternoon. I hope you guys had a chance to get a little rest this weekend. As I'm sure you can tell, the President, as well as the rest of the administration, have a very busy week and agenda moving forward at meetings, events, both inside and outside of Washington.

And with that, I'd like to bring up Secretary Shulkin to talk with you all about the big announcement he made this morning about a historic modernization of the VA's medical records system. And as a reminder, as always, I would encourage you to please be respectful and keep your questions on the topic at hand, and I will be happy to answer questions on other topics after.

Secretary Shulkin.

SECRETARY SHULKIN: Thank you, Sarah. And I'm glad to be here today. As Sarah said, earlier today I made an announcement about the Department of Veterans Affairs decision on electronic health records. And normally that's not too exciting a decision about a product, but I have to tell you I'm very excited about this because I think this is going to make a big difference for veterans everywhere, and it's going to make a big difference for the Department of Veterans Affairs.

I wanted to say from the outset that when the President selected me to be Secretary, he made clear to me that he expected us to act with faster decisions, to act like a business, and to really make sure that we were doing the right thing to change veterans' healthcare. And that's exactly what we're trying to do today.

I had told you when I was here last week I was going to make a decision by July 1st, and I wanted to let you know that we're coming back early and that I'm honoring that commitment.

And so having an electronic health record that can follow a veteran during the course of his health and treatment is one of the most important things I believe you can do to ensure the safety and the health and wellbeing of a veteran. So that's why this is so important.

I told Congress recently that I was committed that VA would get out of the software development business; that I did not see a compelling reason why being in the software development business was good for veterans. And because of that, I made a decision to move away from our internal product to an off-the-shelf commercial product.

As you may know, almost all of our veterans get to us from one place, and that's the Department of Defense. And when I went back and looked at this issue very carefully since becoming Secretary, I was able to trace back at least 17 years of congressional calls and commission reports requesting that the VA not only modernize its system but work closer with the Department of Defense. So that went all the way back to 2000.

But actually, to this date, the Department of Defense and the Department of Veterans Affairs have gone separate ways. We each have separate systems, and each are supporting separate electronic systems. And while we've been able to advance interoperability at the cost of hundreds of millions of dollars to the taxpayers, today we still have separate systems that do not allow for the seamless transfer of information.

And I just want to expand on that a little bit being a doctor. What we are able to do with the Department of Defense over years and years and, as I said, hundreds of millions of dollars, we're able to reach each other's records right now. That's called interoperability. Or at least that's our certification. But what you're not able to do is actually work together to plan a treatment, to be able to go back and forth between the Department of Defense and VA. And so we've not been able to obtain that to this point.

And so for those reasons, I decided that VA will adopt the same electronic health record as the Department of Defense, so we will now have a single system. That

system is known as the MHS GENESIS system, which, at its core, is Cerner Millennium.

The adoption of the same system between VA and DOD is going to allow all patient data to reside in a common system so you will have this seamless link between the departments without the manual or electronic exchange of information.

So as Secretary, I think I'm not willing to put this decision off any longer; I think 17 years has been too long. When DOD went through its decision on electronic medical records and its acquisition process in 2014, it took them approximately 26 months to do this. And I will tell you, in government terms, that's actually a pretty efficient process. I don't think we can wait that long when it comes to the health of our veterans.

And so under my authority as the Secretary of VA, I am acting to essentially do a direct acquisition of the EHR currently being deployed by the Department of Defense that will be across the entire VA enterprise. That's going to allow the seamless healthcare for veterans and the qualified beneficiaries.

Once again, because of the health of our veterans, I've decided that we're going to go directly into the DOD process for the next generation electronic health record.

Let me just tell you, this is the start of the process. VA has unique needs that are different than the Department of Defense's. And for that reason, VA -- while it's adopting an identical EHR to DOD -- needs additional capabilities to maximize interoperability with our community providers. As you know, one-third of our healthcare goes outside the VA into the community. And this is critical that we can have the same interoperability with our community providers.

We're going to have our VA clinicians very involved in how we develop this system and how we implement it. Because in many ways, the Department of Veterans Affairs is actually well ahead of the Department of Defense in clinical IT innovation, and we're not going to discard all the things that we've done in the past. And in fact, that's how we're going to help DOD get better. So this is a system that's going to strengthen care for veterans and our active servicemembers.

We're going to be embarking upon something that's never been done before -- that is an integrated product, using the DOD platform, but it's going to require this integration

with other vendors to create a system for veterans so that they can get care both in the community as well as in the Department of Defense. That's going to take the active cooperation of many companies and thought leaders, and it will serve as a model not only for the federal government, of federal agencies working together, but for all of healthcare that is trying to seek this type of interoperability.

Once again, I want to thank the President for his incredible commitment to helping our veterans and support the VA. And I also want to thank the Department of Defense, who have been incredibly helpful in this process, and the American Office of Innovation, who has been incredibly helpful in helping us think differently about how to solve problems.

This mission is too important for us not to get right. And I assure you we will. And I'd be glad to take any questions.

Q Mr. Secretary, two questions. One, how long will this take? You said it's the beginning of the process. And then, two, how will a veteran know and feel and experience a difference because of this decision?

SECRETARY SHULKIN: Great. Great question. So this is the beginning of the process where we're going to start essentially entering into the details of how we would implement a contract. We expect that process -- again, trying to do this as quickly as possible -- will be about three to six months at the latest. And during that time, we're going to be developing both the implementation plans and the cost of this system so that we can go out and make sure that we're doing this right and that we have the resources available to do it.

Secondly, to a veteran, they're now going to be able to have a single system from the time that they enlist in the military until potentially they die -- one single lifetime record. And so there will never be a need to be able to go back and forth and say, records aren't there for me, or my doctor isn't able to have input into what the Department of Defense is doing. And our community partners need that same type of interoperability.

Q How will that change things for people in the system now?

SECRETARY SHULKIN: Well, as you know, my top clinical priority is to reduce veteran suicide. One of the areas that we've identified is a gap in the transition --

when you leave the military and all of a sudden you no longer have that structure that you were used to, and what happens to you before you get enrolled into either VA healthcare or community healthcare. That no longer is going to happen. We're going to have a seamless ability to make sure that information is there.

So to a veteran who's experiencing emotional disorders, when they reach out for help it's going to be easier to get them help. For other people who have physical problems, that same information is going to be there, so you can develop a coordinated care plan.

Q Mr. Secretary, you're waiving competitive bidding for this. Do you have a ballpark estimate of how much it's going to cost? And is that factored into your current budget?

SECRETARY SHULKIN: We have not begun the cost negotiations. We know the Department of Defense had a \$4.3 billion contract. VA is a bigger organization. But we have not begun those negotiations. Part of the reason why I have waived that process is because I absolutely believe -- and I've spent a lot of time reviewing the materials -- it is in the public interest to move quickly. And I also believe we can do this cheaper for the taxpayers by essentially moving forward quickly without a lengthy process.

Yes, sir.

Q Thank you, Mr. Secretary. You were part of the last administration; in fact, you were Deputy VA Secretary. Is there a particular reason why this process, which you're announcing today, did not take place during the Obama administration? Did you drop the ball in the Obama administration? If you could, explain a little bit about that.

SECRETARY SHULKIN: This is one of those problems that I talked about last week with all of you that I think spans administrations and has been going on for decades. I can count no fewer than seven blue ribbon commissions that have recommended that we move in a direction like this. The Commission on Care, which was a \$68-million study, came out with this recommendation. And so I think people have felt that this was a direction that they should be moving in.

I will tell you, it is hard to make decisions. There's a lot of built-in movement to keep things the way that they are. So while in the last administration we considered this

and we looked at a number of things, I think that it really was this administration and the President's mandate to do business differently that allowed us to move forward with this type of speed.

Yes, sir.

Q You mentioned that (inaudible) for the contracting period. At what point in the future -- in the coming months or years, when veterans will be transitioned out, how will the records be seamlessly transferred to the VA? When does it kick in? And the second question would be, who at the White House was involved in this process? This is a priority of the OAI.

SECRETARY SHULKIN: So, two questions. One is about the timing: When does a veteran actually begin to experience this? That is what we're going to be determining, the timeline during this three-to-six-month period when we roll it out. I do believe -- and everything that I'm doing is trying to act with speed -- that working with the Department of Defense and already using their planning materials and their change management tools, we will be able to do this much faster than if we had done it alone.

So the Department of Defense has taken a period of time before they've implemented their first system in the Fairchild Air Force Base, which has been successful. But I think we will be able to do ours even faster than they did.

Thanks again to Secretary Mattis and the Department of Defense, they have actually detailed over to us some of their key executives who have worked on their project; they now are at VA and they're helping us actually begin this. So we have institutional knowledge from them. That's considerable.

Your second question had to do with who at the White House has been working with us. I will tell you that in this decision I not only reviewed large numbers of reports, independent management reports that we had consultants who had come into help us, but I've consulted with all the stakeholders that I could -- hospital CIOs, hospital CEOs, members of Congress, and people at the White House to be able to talk to all the stakeholders to make this decision at the White House. Of course, we've talked with the President's office, but also working closely with the American Office of Innovation. And all those are stakeholders that contributed to my thinking.

Yes, please.

Q During the Bush years, there was a problem with computers when it came to Medicaid and Medicare. During the Obama years, we know about ACA. What are the guarantees when you try to bring all -- integrate all the information from all the services into this one system? What are the guarantees?

SECRETARY SHULKIN: No guarantees. High-risk process, particularly when you're doing this in the largest integrated health system in the country. And so this is high risk. It's one of the reasons I made this decision. I think by going with the Department of Defense system, we are lowering our risk because we have a federal partner who's already gone through this process, and that's why we're taking their expertise and putting it into the VA. And again, with Secretary Mattis's commitment to work with us closely, I think we're lowering the risk.

But as a private sector CEO, I've done this several times successfully, but I've never done it on this scale, and so the risks are there. But we're going to make sure that we do this the right way.

Q A follow-up. What happens to those older veterans who have problems? And you're doing this now, trying to get it right now. But what happens to those who have been in the system for a long time? Where do they come in, and how long will this take to help them get into the system?

SECRETARY SHULKIN: Well, this is a problem that many healthcare organizers that have transitioned to other electronic health records have found. You do not discard your old information. That would be clinically irresponsible. So you have to have a way of making sure that the old information is there, it transitions into a new system, or remains available for clinicians to have.

So that's a problem that I think that we're doing to be pretty good at handling.

Yes, sir.

Q Do you have the cost-benefit analysis, and can you share that with us?

SECRETARY SHULKIN: Yeah, some of our management consultants who have looked at this issue of off-the-shelf versus staying with maintenance have helped us look at the cost-benefit decision. That was part of my thinking. This is essentially the

most cost-effective way to go to a commercial off-the-shelf system. The problem with what VA has been doing -- we have a \$4.1 billion budget in IT; 70 percent is maintaining our current systems. And our systems are getting older. The Band-Aids are getting harder to hold the system together. Each year, I believe it will get more and more expensive to modernize our own system. We aren't able to keep the type of people that we want. So I think the best cost-benefit decision for taxpayers and for veterans is to move to an off-the-shelf system.

Q So a quick follow-up to that. You're talking about an off-the-shelf system. You're not developing new software. So the security will be there?

SECRETARY SHULKIN: What's that?

Q So the security -- the biggest problem with off-the-shelf is security.

SECRETARY SHULKIN: One of the reasons, again, why I chose to go this route is because of cybersecurity. The Department of Defense has already invested in such high cybersecurity standards. Those are the standards that we need to be able to assure privacy and security for our veterans. And that's part of the reason why we're going this.

Just to be clear, we are adopting an off-the-shelf system, but as I mentioned before, we are also embarking upon something that nobody has done before because of this problem of these commercial systems don't talk together. And we need them to talk together because many of our patients are out in the community, and our academic partners, many of them, use other systems besides Cerner. So we're creating something that is taking the best of what's off the shelf, but also creating something that doesn't exist today.

Q Mr. Secretary, I just wanted to clarify a couple things. The only thing that Congress needs to get involved with is the appropriations, yes or no?

SECRETARY SHULKIN: Yes.

Q You don't know what you're going to be asking for, so it's not built in the FY18 budget, right?

SECRETARY SHULKIN: You're correct.



Q But it will be higher than \$4 billion, right?

SECRETARY SHULKIN: I would love to do it for less, but I think that would be unrealistic.

Q And you don't know -- you don't have a ballpark, right?

SECRETARY SHULKIN: Yes.

Q But is that going to hamper the appropriations if you want a three-to-six-month timeframe to be able to initiate what you're doing?

SECRETARY SHULKIN: We've already begun to engage, starting today, with the appropriations leadership in both the Senate and the House. And I will tell you that this is something that Congress has been asking for. I believe that they will support this. Of course, this has to be a dialogue between us. They have to make sure that we're making the decision at the benefit of the taxpayers as well as veterans and active servicemembers.

But I do believe we will have the leadership and the partnership to get us there.

Q And just to clarify one last thing. If this is an off-the-shelf system, this is not a low-bid process. That's why you're going this speed, right? You are not putting this out to bid. You have selected the vendor.

SECRETARY SHULKIN: We have not agreed upon any pricing. But I can assure you that before we were to sign off on a contract, we are going to make sure that this is the best value for taxpayers.

Q Mr. Secretary, you've gotten a couple questions around this, but what kind of fights do you anticipate in Congress when this -- by selecting this venue and not having a competitive bid, there will be some pushback, right?

SECRETARY SHULKIN: Well, this wouldn't be Washington if there wasn't pushback. But I don't expect -- I do not expect any major fights on this. I think that the one thing that I feel extremely proud about, about the way the Congress has acted when it comes to veterans' issues, is the bipartisan support when it's the right thing to do for this country's veterans. And I do expect that to essentially carry through on this.

That does not mean that it is not appropriate to ask hard questions; to make sure that the due diligence is there; to make sure, as we said, this is a risky process -- that we've thought about everything and that we've considered people who have different options. But in the end, I do believe this is something that we will see strong bipartisan support for.

Q And another version of one of my colleague's questions: EHR has been promised before. Why is it going to happen? It was promised during the previous administration. Why is going to happen now? You say bipartisan support; we haven't seen a lot of evidence of that in Washington. So what makes you hopeful that it's this time?

SECRETARY SHULKIN: Well, I've not seen the Department of Veterans Affairs come out with this type of decision before, so I think that this is new. We now know what is in the best interest of veterans, and we're moving ahead with an accelerated process so that we can get this done.

And I do believe that this is exactly what Congress has asked us to do. I can count four times when they've asked DOD and VA to get in the same room, and I can count four times when VA and DOD left doing separate things. So this one is going to be different. The Department of Defense and the Department of Veterans Affairs are together in lockstep on this, and the President is behind this. And we need Congress to support it, and I believe that support will be there.

Yes, all the way in the back.

Q Thank you. You mentioned how suicide prevention is one of your top priorities.

SECRETARY SHULKIN: Prevent -- suicide prevention, yes.

Q Yes. In that context, are you willing maybe to sit down with DOD and encourage the active duty officers to go on record about their mental problems and issues, while they are still in active duty, so you avoid, in a way, if it shows up after they leave the service?

SECRETARY SHULKIN: We are doing exactly that. We are in discussions with the Department of Defense. Secretary Mattis and I have talked about this. We know that what we're doing is not enough, and we have to look at exactly the issues that start in

the Department of Defense and make sure that we're addressing them. The transition time and that gap between when you leave active service to when you enter as a civilian and you get healthcare, that's an area that we have to pay particular concern about. And that's why this EHR is going to be helpful. But we have to look all the way back into the process, just as you're suggesting. So we are doing that.

Yes, sir.

Q You mentioned seven blue ribbon commissions have recommended something along those lines. What's been the opposition -- the main reason it hasn't happened?

SECRETARY SHULKIN: Well, I think one of the things that we're doing differently in this administration is that we're essentially eliminating some of the silos and turf battles. And, frankly, I think that if you put the veteran and the servicemember first, you would come to the conclusion that we've come to today.

But nobody likes to give up power and control over their system. In the Department of Veterans Affairs, we are very, very proud of our history of being the first major system to develop electronic medical records. This was done over 30 years ago by brave clinicians who went on their own and developed this. So giving this up, I do not want to underestimate how difficult that will be for people in the Department of Veterans Affairs. Change is not easy. But when you've had that for 30 years, it's going to be really hard. So this is a major decision for the Department of Veterans Affairs.

And as I've said previously, I wish the Department of Defense had joined us years and years ago so that we could be working together. But that isn't the situation I face as Secretary. They've moved forward. It's time that we move forward and come together.

I'll take one more question.

Q Secretary, I'll just drill down on the question that Zeke asked, which was the Office of American Innovation that's here at the White House. You mentioned one of the stakeholders you consulted with. Can you speak about that role, specifically Jared Kushner who helps lead that office, and what kinds of interactions you've had with him in developing this?

SECRETARY SHULKIN: Yeah. When I became Secretary and the office was stood up, they indicated a strong interest in helping the Department of Veterans Affairs, which I welcomed. And when we sat down and they said, talk about the pain points -- what do you really need to do to make a quantum leap in where you are -- I identified the electronic record.

And what we talked about is best practices, about how industries make quantum changes, how you go out and solicit information from leaders in the field to make sure that you get the right stakeholders and opinions. And so they were advisory in this process. This decision, though, was fully my decision to make, and there was no influence ever put on this. But they were very helpful in helping us keep and move the process along, and in facilitating discussions with the Department of Defense as well.

Thank you very much, everyone. Appreciate it.

MS. SANDERS: Thank you very much, Mr. Secretary.

As the Vice President noted this morning, the American people elected a builder to be the 45th President of the United States, a builder who has a vision for modernizing the entire federal government. Secretary Shulkin just spoke about how that vision is being carried out at the VA, and this morning, the President launched a "great new era in American Aviation," starting with the modernization of our outdated air traffic control system.

Today, everything from the cars on the road to the cell phones in our pockets use GPS technology, but Washington has been unable to upgrade the air traffic control system from ground-based radio and radar systems, despite 14 years of attempts by the FAA.

This delay has left us stuck with a system that just can't keep up with an industry that has grown exponentially since it was designed. Our current air traffic control system costs our economy as much as \$25 billion a year in delays, inefficiency, and unreliability. This is a problem that nearly everyone agrees needs to be solved.

Joining the President today were representatives from the air traffic controllers union, passenger advocates, leaders of airline and cargo companies, and every former COO of the FAA. And those aren't groups that typically agree on much of anything.

But even with all of these stakeholders behind air traffic control reform, it was still stuck in the Washington political machine. President Trump was elected to unstick these kind of common-sense efforts, and we'll be continuing to work with Congress on getting these principles turned into legislation and getting that legislation to the President's desk.

To accompany the President's announcement, the Department of Transportation today launched a new microsite -- that's SmarterSkies.gov, which will continually be updated with factsheets, Q&A, and other information regarding ATC reform.

Infrastructure is only one of the many action items on the President's legislative agenda. The healthcare team is engaging with Congress daily on the American Health Care Act, which we hope to see the Senate take up soon. New stories of skyrocketing premiums and fleeing providers are coming almost every day.

Just last Friday, Blue Cross Blue Shield in Nebraska announced that they are cancelling their Obamacare-compliant bronze and catastrophic plans, which are the only remaining plans they currently sell on the exchange. That leaves the entire state with only one choice for insurance on the exchanges, and that insurer raised rates by 51 percent last year and is threatening to pull out of Iowa completely.

With our healthcare system breaking down around us, this administration is committed to finding a solution. This afternoon, Vice President Mike Pence, Secretary of HHS Services Dr. Tom Price, Administrator of the Small Business Administration Linda McMahon, and Administrator of the Centers for Medicare and Medicaid Services Seema Verma are holding a listening session with female small business owners to talk about how we will repeal and replace Obamacare with a plan that benefits all Americans.

Tomorrow, the President will welcome representatives and senators to the White House to talk more about what's next on the legislative agenda, including repealing and replacing Obamacare and crafting a revolutionary tax reform proposal that will provide relief to hardworking taxpayers.

And on Wednesday, Infrastructure Week continues with the President's visit to Cincinnati, Ohio, where he will speak about his wide-ranging vision for rebuilding our country, with a special focus on repairing our 12,000-mile inland waterway system, which carries \$230 billion in commerce annually while our locks and dams crumble

because the federal government can't fund the critical repairs they need. The President will present his sustainable solution to this problem in Ohio on Wednesday.

And because I know all of you are very deeply concerned about the births of each of my children, I wanted to carry on with tradition and announce that my son, George, will be two on Thursday. So, happy early birthday to George. And with that, I'll take your question.

John Roberts.

Q Sarah, as you know, also on Wednesday, as the President heads to Ohio, James Comey is scheduled to testify before the Senate Intelligence Committee. And there's question as to whether or not the White House will allow him to testify -- pardon me?

Q Thursday.

Q Thursday. I'm still jetlagged.

MS. SANDERS: If only they had that same flight before correcting us.

Q He's scheduled to testify on Thursday. And there's a question as to whether or not you will invoke executive privilege, or if you will allow him to testify. And I have a second question.

MS. SANDERS: The President's power to exert executive privilege is very well established. However, in order to facilitate a swift and thorough examination of the facts sought by the Senate Intelligence Committee, President Trump will not exert executive privilege regarding James Comey's scheduled testimony.

Q I have a follow-up on that question. On the President's tweets regarding the travel ban, Kellyanne Conway's husband pointed out that such tweets are not helpful when it comes to the Solicitor General's ability to make an effective argument before the Supreme Court. Is the President concerned that he may be tainting the waters of the legal system by issuing such tweets?

MS. SANDERS: Not at all. The President is very focused on exactly what that order spells out, and that's protecting Americans, protecting national security. And he has every constitutional authority to do that through that executive order, and he maintains that and that position hasn't changed in the slightest.

Jon.

Q Thank you, Sarah. Why was the President picking a fight with the mayor of London right after his city was hit by a terrorist attack?

MS. SANDERS: I don't see that the President is picking a fight with the mayor of London at all. I think that, again, the President's point is something he said, frankly, back -- gosh, it's been almost two years now, a year and a half ago -- when the President talked about how we have to be more committed to national security. One of the reasons we have the travel ban here through that executive order is a focus on national security. That was the point he was trying to make.

Q But the President is saying that the mayor said there is no reason to be alarmed by the terrorist attack. That is not what the mayor said. The mayor, in fact, said that the threat level remains severe, that the chances of another attack are highly likely. He was saying don't be alarmed by the armed police presence on the street. And the President directly misrepresented what the mayor of London said.

MS. SANDERS: I don't think that's actually true. I think that the media wants to spin it that way, but I think that the President --

Q You think the mayor was saying there's no reason to be alarmed by an attack on his city? Do you think that's what he was saying?

MS. SANDERS: Look, I think that the point is, is there is a reason to be alarmed. We have constant attacks going on not just there but across the globe, and we have to start putting national security and global security at an all-time high. President Trump has been very clear that's his priority and he's not backing away from that.

Steve.

Q Sarah, what was the President's reaction to the move by several Middle Eastern allies to sever ties with Qatar?

MS. SANDERS: The President is committed to continuing to have conversations with all of the people involved in that process, with all of those countries. We want to continue to deescalate that. And at this point, we're continuing to work with each of those partners.

Q Secondly, did the President get any word that this was going to happen when he was in Saudi Arabia a couple of weeks ago?

MS. SANDERS: I'm not aware of that. But the State Department would probably be best suited to answer that question.

Jim.

Q You just mentioned the word "ban." The President, when he was tweeting earlier today, said, "People, the lawyers and the courts can call it whatever they want, but I am calling it what we need and what it is, a TRAVEL BAN!" But early on in the administration, when you were trying to justify, when this White House was trying to justify the executive order on extreme vetting and these travel restrictions, the White House was adamant that these were travel restrictions, that it was not a travel ban. Sean Spicer, from that podium, said it was not a travel ban. Is it a travel ban?

MS. SANDERS: I don't think the President cares what you call it, whether you call it a ban, whether you call it a restriction --

Q Sounds like (inaudible) what you call it.

MS. SANDERS: He cares that we call it national security and that we take steps to protect the people of this country. It's real simple. Everybody wants to get into the labels and the semantics of it, but the bottom line is he's trying to protect the citizens of this country. The danger is extremely clear. The law is very clear. And the need for this executive order is very clear. And the President's priority in protecting the people is very clear. Full stop.

Q And let me ask you to follow up on what Jon was asking about with respect to the mayor of London. There are going to be folks who are going to ask the question: Was the President attacking the mayor of London because he's Muslim?

MS. SANDERS: Not at all. And I think to suggest something like that is utterly ridiculous.

Matthew.

Q Given the importance of Twitter --



MS. SANDERS: I said Matthew.

Q Sorry.

MS. SANDERS: That's okay. I'll come back around.

Q Thank you. Given the importance of Twitter in the President's communication strategy, can you tell us if his tweets are now being vetted by a lawyer or any other aide? And if not, why not? Or if so, when did that start?

MS. SANDERS: Not that I'm aware of. But I think social media for the President is extremely important. It gives him the ability to speak directly to the people without the bias of the media filtering those types of communications. He at this point has over 100-plus million contacts through social media and all those platforms. I think it's a very important tool for him to be able to utilize.

Matthew.

Q Thanks, Sarah. So I have a question about those executive order comments the President made this morning. He said that he wishes that his Justice Department had stuck with the original executive order. DOJ, of course, is part of the executive branch. If he wanted to stick with the original EO, then why didn't he order the Department of Justice to stick with that? Why did he even sign the revised one if he wanted to stick with the original?

MS. SANDERS: And the purpose -- they were trying to meet the demands of the Ninth Circuit. But, again, the President has been very clear, he wants to go as far and as strong as possible under the Constitution to protect the people in this country. That's what he felt the first executive order did. The second one was another version of that.

But, look, let's be really clear about what this is. These are six countries that were identified not just by this administration, but by the Obama administration and by Congress that are dangerous, they're unstable, they're volatile. And frankly, they're not capable, or unwilling to even vet people coming in or out. That's what this is about. Everybody wants to make it something different than a national security issue, and that's exactly what it is. And that's why the President is so focused on pushing it forward in the strongest form possible.

Q If it is that important as national security, and he believed the first one was safer and constitutional, then why did he sign the second one, if now he's coming out today saying, oh, we never should have done the second one?

MS. SANDERS: He was looking to, again, match the demands laid out by the Ninth Circuit and, for the purpose of expediency, to start looking at the best way possible to move that process forward.

Q Sarah, I just want to clarify that. So as it is currently written, given that he called it, as Matthew is pointing out, "politically correct" or (inaudible), does the President support his own travel ban as it is currently written?

MS. SANDERS: Absolutely. Again, he supports steps moving in the direction at all levels and forms possible. He wants the strongest executive order out there, and he wanted to move as quickly as possible, and that was the reason for that purpose.

Q Two questions. The original intent of the travel ban was to provide a temporary pause in order to review immigration policies and procedures of those coming into the United States. That was January 21st, 22nd. It has been nearly five months since then. What progress has the administration made looking and vetting and doing some of that while this travel ban is working its way through the court system?

MS. SANDERS: Extreme vetting is taking place. And that's something that's extremely important that was laid out in the memo. I think one other thing to --

Q Specifically --

MS. SANDERS: I'm sorry?

Q So specifically, though, what has administration been working on when it comes to extreme vetting?

MS. SANDERS: Look, I think that, if you want to get down into the details, I would refer you to the Department of Justice on some of those points. But one of the things I can tell you is that there are over 300 people that are under investigation that are part of this process -- under investigation for terrorist-related activity in our system. And that's a large part of the vetting process that the President has stepped up.

Q And then my last one for you. You just mentioned that the President's tweets are --

MS. SANDERS: Four-question Monday.

Q -- a filter -- essentially a way to get around the filter of the bias media when it comes to his tweets, that he sees them as an important way to get his message out. Just this morning, another top advisor in this White House said that the media was obsessed with the President's tweets, implying they didn't matter. So I guess, just philosophically, which is it? Do the President's tweets matter or are they just something that the media gets obsessed about?

MS. SANDERS: I think that they matter in the sense that it gives him a communications tool, again, that isn't filtered through media bias. But at the same time, I do think that the media obsesses over every period, dot. As John was a perfect example earlier, he made a mistake. His colleague politely corrected him. If somebody from our administration had done the same, all hell would have broken loose, and it would be that -- you know, it's just total, like, chaos and conundrum here at the White House.

So I think it's just the obsession over every detail of the President's tweets.

Q But you're not disputing these are presidential statements.

MS. SANDERS: They come directly from President's Twitter account? No.

Q So to follow up on the whole travel ban thing, the President also said this morning he'd like the Department of Justice to ask the Supreme Court for an expedited hearing. Has he done that? Has he asked DOJ for an expedited hearing?

MS. SANDERS: He has.

Q So he instructed them to instruct --

MS. SANDERS: He has asked for an expedited process, I can say that.

Q And then secondly, can you say, on the ambassador -- the U.S. ambassador to the UK, can you say why we don't have one yet? Is there a reason for the delay -- something in particular?

MS. SANDERS: I'm not aware of that, and I'll have to check and get back to you on that.

Major.

Q Sarah, following up on that last question -- in addition to seeking the expedited process, the President said, so we can seek a much tougher version. Is a third version of the travel ban in the works?

MS. SANDERS: Not that I'm aware of. But I know that, again --

Q What should we take from that presidential statement?

MS. SANDERS: That the President is going to continue taking aggressive steps every single day to protect the people in this country.

Q Is it fair to interpret that he's asked DOJ to contemplate a tougher version?

MS. SANDERS: I think he's asked the entire administration to look for ways we can defeat ISIS and to protect the American people. And if that's part of that process, it could be. But I don't know specifically if that's part of it.

Q And, Sarah, from your vantage point then, based on the questions that Jonathan and Jim asked, what is the origin of this confusion or misunderstanding about what the President said about the mayor of London? Is it the mayor of London's fault?

MS. SANDERS: I'm sorry, I'm not following what you're asking.

Q Well, the mayor of London and many there feel that the President not only took the comments that the mayor of London made out of context, but compounded an emotionally difficult experience for Londoners. Who's to blame for that? Are they misinterpreting the President? Or did the President make a mistake?

MS. SANDERS: The President has been extremely clear that we stand in complete solidarity with the United Kingdom and protecting that relationship and that partnership. And we're fully committed to doing everything we can to help them in this process, and we condemn any act even similar to that.

April.

Q How is this President not contradicting this administration when he tweets out "TRAVEL BAN" in caps? And when you're talking about extreme vetting, how does he not contradict himself when he's trying to get this thing to go through the Supreme Court?

MS. SANDERS: Well, look, again, I don't know how many times I have to answer this question today, but I'll try to do it one more time. I think that the President isn't concerned with what you call it; he's concerned with national security and protecting people in this country. Whether you call it a travel ban --

Q -- he goes from one extreme to the next, and then goes back to the first in the Supreme Court --

MS. SANDERS: He's not concerned with being politically correct, he's concerned with protecting the American people. I mean, that's the bottom line here. And he's going to take whatever step he can to move that agenda forward.

Q But does he believe this could be a loss from him going for him and this administration with this extreme vetting or travel ban, going from travel ban to extreme vetting, back to "TRAVEL BAN" on Twitter in extreme caps?

MS. SANDERS: I don't think he thinks any step he takes towards moving the ball forward in protecting the American people and implementing the executive order is ever going to be a mistake.

Q And MY last question, where is Sean?

MS. SANDERS: I'm sorry?

Q Where is Sean?

MS. SANDERS: He's here today.

Q Why didn't he come out?

MS. SANDERS: This is part of my job as well. Did you guys ever ask any of the other deputy press secretaries when they came out --

Q Yes, we asked them all.

Q We asked all of them.

Q Is he in a new position now or are you just --

MS. SANDERS: I mean, he is taking on a little bit of extra duty at this point. So I think it's --

Q Has his position changed then?

MS. SANDERS: It's probably upgraded at this point, given that we don't have a communications director.

Q So you will be the new press secretary here?

MS. SANDERS: I did not say that at all. I'm just filling in for the day, April. There are a lot of demands on his schedule, particularly given the fact that there's not a communications director, and this is part of my job as well. And when I'm needed, I'll step in.

Q One of the major stories this morning in Washington suggested that, in fact, in Brussels, the President was given a draft of his speech to the NATO partners that suggested that he would invoke or at least respect the Article 5 commitments. A senior administration official told us flatly that the President himself did not take the Article 5 reference out of the speech. So, Sarah, who did?

MS. SANDERS: I'm not aware of that, and I'd have to check back and let you know. Thanks, guys.

END

2:24 P.M. EDT